EXHIBIT B

CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS

File Number 6167-690-2

0.7123

State of Allinois Office of The Secretary of State

Whereas, application for certificate of authority to transact business in this state of

TELEOCMEZ CORP.

INCORPORATED UNDER THE LAWS OF THE STATE OF COLORADO HAS BEEN FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE BUSINESS CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

Now Therefore, I, Jesse White, Secretary of State of the State of Illinois, by virtue of the powers vested in me by law, do hereby issue this certificate and attach hereto a copy of the Application of the aforesaid corporation.

In Cestimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, at the City of Springfield, this

| STATE | day of | JUNE | A.D. | 2001 | and of the Independence of the United States the two hundred and | 25TH | .

Desse White

Secretary of State

Form **BCA-13.15**

(Rev. Jan. 1999)

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-1834 http://www.sos.state.ll.us

Payment must be made by certified check, cashier's check. Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN ILLINOIS

This space for use by Secretary of State

JUN - 1 2001

JESSE WHITE SECRETARY OF STATE

SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Dato

6-1-01

License Fee

Franchise Tax \$ 25.00 75:00 Filing Fee \$

Penalties

\$

Approved:

| 1. | (a) | CORPORATE NAME: | TELECOMEZ CORP. | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
|----|--|--|---|--------|--|--|--|--|--|--|
| | (Complete item 1 (b) only if the corporate name is not available in this state.) | | | | | | | | | |
| | (b) ASSUMED CORPORATE NAME: (By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the transaction of business in Illinois. Form BCA 4.15 is attached.) | | | | | | | | | |
| 2. | (a) (b) | State or Country of Inco | orporation: <u>COLORADO</u> 1/10/2001 | | *** | | | | | |
| | (c) | Period of Duration: | PERPETUAL. | | | | | | | |
| 3. | (a) Address of the principal office, wherever located: | | | (b) | (b) Address of principal office in Illinois: (If none, so state) | | | | | |
| | | 3-A-3 CORONADO CT. . COLLINS, CO 80525 | T | | NONE | | | | | |
| 4. | Nam | e and address of the reg Registered Agent | istered agent and registered CORPORATION SERVICE First Name | | | Last Name | | | | |
| | | Registered Office | 422 NORTH NORTHWEST | HIGH | WAY Stroot | Suite # | | | | |
| | | _ | PARK RIDGE, 11. 6006 City | 8 - 0 | OOK COUNTY ZIP Code | County | | | | |
| 5. | State | es and countries in which | it is admitted or qualified to | transa | ct business: (Include state | of incorporation) | | | | |
| 6. | Names and residential addresses of officers and directors: Name | | | | | | | | | |
| | Direct Direct | dor SANSHIRO FUKA | DA - 3-27-9 MISUCIE | LUI, | HANNO 357 JAPAN | | | | | |

7. Purpose or purposes proposed to be pursued in transacting business in this state:

(If not sufficient space to cover this point, add one or more sheets of this size.)

TO OFFER TELECOMMUNICATION SERVICES, INTERNET SERVICES AND CONTENT DELIVERY

| | Class | d and issued sha Sories | Par Value | Number of Sha Authorized | | Number of Shares Issued | | | |
|------|---|---|--|--|--------------------|--|--|--|--|
| | COMMON PREFERRE | | WITHOUT PAR VALL | | | 10,000,000 | | | |
| 9. | Paid-In C (*Paid-in C | | 000.00 he terms Stated Capital & F | Paid-in Surplus and | is equal to the | total of these accounts.) | | | |
| 10. | (a) Give an estimate of the total value of all the proportion for the following year: | | | operty" of the | ty" of the \$1,000 | | | | |
| | (b) Give corp | an estimate of to oration for the follogical | he total value of all the pro owing year that will be local | operty* of the ted in Illinois: | \$ <u>NONE</u> | | | | |
| | (c) State trans | the estimated acted by it every | otal business of the corpo where for the following year | oration to be | \$_900,000 | | | | |
| | (d) State trans Illino | acted by it at or | nnual business of the corp from places of business in | oration to be the State of | \$ 24,000 | | | | |
| ۱. | Interrogate | ories: (Important - | this section must be comp | leted.) | | | | | |
| 4 | (b) Numi (c) Numi (d) Is the | ber of shares of a per of shares of a corporation trans | ch all contracts with the cor If classes owned by residen If classes owned by non-res sacting business in this stat 1(d) is yes, state the exact o | its of Illinois: NON Bidents of Illinois: 1 e at this time? NO | E .0,000,000 | FT COLLINS, | | | |
| | | | ed by a certified copy of the the proper officer of the sta | | | ed, duly authenticated, within tion is incorporated. | | | |
| i, • | The undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in BLACK INK.) | | | | | | | | |
| | Datod | | Day) (Year) Acol (Year) Acol (Year) Acol (Year) Acol (Year) Acol (Year) | ······ | Mua | e of Gorporation) | | | |

- PROPERTY as used in this application shall apply to all property of the corporation, real, personal, tangible, intangible, or mixed without qualifications.
- When the response to #11(a) lists ONLY an Illinois address, then the total business as reflected in #10(c) is also considered to be Illinois business for the purpose of computing the Illinois allocation factor. By signing this application, the corporation affirms that it is aware that the amount of paid-in capital, and consequently the amount of license fees and franchise taxes, may be proportionately higher due to the Illinois address shown under #11(a).